SM-4742-B Rev. 8/03 Attach signed copy to the state agency report when disposal has been completed.		MAIL TO: Michigan Department of Education SCHOOL SUPPORT SERVICES Food Distribution Unit P.O. Box 30008, Lansing, Michigan 48909						Direct questions regarding this form to (517) 373-8642.
CHECK ALL THAT APPLY FOR THIS REPORT. CSFP Summer Programs NSL TEFAP		D	OISPOSA	HORIZATION			MONTH/YEAR:/ AGREEMENT NUMBER:	
NAME OF RECIPIENT AGENCY								
ADDRESS		FAX NUI					MBER	
This notification will serve as authority for a representative of your recipient agency to destroy COMPLETELY (by the method indicated below), the following USDA commodities which have been inspected and found to be unfit for human consumption.								
соммодіту		NIT UNI		CONDITION WHEN INSPECTED		TOTAL		METHOD OF DETRUCTION
		· ·		*****		Quantity	Value	
· · · · · · · · · · · · · · · · · · ·								
							·	
					·			
TOTAL:								
CHECK ONLY ONE BELOW. RECOMMENDATION								
Permission granted for disposal of product.								No Claim:
Further information requested. Please contact.							Claim:	
Retain noted product for inspection.							Value:	
SIGNATURE OF RECIPIENT AGENCY REPRESENTATIVE SIGNATURE OF STATE AGENCY REPRESENTATIVE AGENCY REPRESENTATIVE								
DATE DATE OF INSPECTION TELEPHONE ()								

NOTE: Disposal authorizations are to be given by state agency personnel ONLY.